

Treasurer's signature (in ink)

# Form CPF M 102: Campaign Finance Report

## Municipal Form

Office of Campaign and Political Finance

CITY OF CAMBRIDGE ELECTION COMMISSION

onumon worlds Massachusetts	2005 JAN 20 A II: 48
ile with: ity or Town Clerk or Election Commission Please print or type all information, except	
Fill in dates: Moonth Date Year Reporting Period Beginning Oct . 20 2005 Endi	ing Dec 31 2005
Type of report: (Check one)  □8th day preceding preliminary □8th day preceding election □30 day af	fter election Syear-end report  dissolution
Patricia M. NOLAN Committ	ree to Elect Patty Nolan
Full Name of Candidate (if applicable) School Committee, Cambridge Dal	Committee Name
184 Huvon Ave. Camb. MA 184 Huvo	Committee Mailing Address
Tel. No. (optional)	Tel. No. (optional)
SUMMARY BALANCE INFORM Line 1: Ending balance from previous report Line 2: Total receipts this period (page 2, line 11) Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this period (page 3, line 5: Ending balance (line 3 minus line 4)  Line 5: Total in-kind contributions this period (page 4) Line 7: Total (all) outstanding liabilities (page 4) Line 8: Name of bank(s) used Walk will	\$ 2991.46 \$ 3350.00 \$ 6341.40 line 14) \$ 5167.45 \$ 1173.95 page 4) \$
Affidavit of Committee Treasurer:  I certify that I have examined this report including attached schedules and it is, to the best of my kno finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions activity of all persons acting under the authority or on behalf of this committee in activity of all persons acting under the penalties of perjury:	ributions and liabilities for this reporting period and represents th

## FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

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	Affidavit of Candidate: (check 1 box only)
	Candidate with Committee and no activity independent of the committee
	I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign
	finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any
	contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.
	Candidate without Committee OR Candidate with independent activity filing separate report
	I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign
	finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the

campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. Signed under the penalties of perjury:

Jan. 19,2006 Candidate signature (in ink)

#### SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page number on each page.

Date Received	Name and Residential Address (alphabetical listing required)	Amo	unt	Occupation & Employer (for contributions of \$200 or more)
		0		
	SCA	e 0	1	1
	atta	1	W	
	1	ef		
	50			
Line 9: Tot	tal receipts in excess of \$50 (or listed above)			
Line 10: Tot	tal receipts \$50 and under* (not listed above)			
Line 11: TO	OTAL RECEIPTS IN THE PERIOD			Enter on page 1, line 2

<sup>\*</sup> If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized above.

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#### SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.

Date Paid	To Whom Paid (alphabetical listing)	Purpose of Expenditure	e Amoui				
		0- 1					
	5	2 red	Λ				
		Hart 1.					
THE	6	100					
		10he					
		Line 12:	Expenditures over \$50				
		Line 13:	Expenditures \$50 and under*				
1	Enter on page 1, line 4	Line 14:	TOTAL EXPENDITURES				

<sup>\*</sup>If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

Page 3

	n excess of \$50 and un		日本 十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二	# 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
in ex		cess of \$50 (listed a	Total receipts in excess of \$50 (listed above) Total receipts \$50 and under (not listed above)	Total receipts in excess of \$50 (listed above) Total receipts \$50 and under (not listed above)
16 Hilliard St.		Cambridge	Cambridge MA	
32 Ash Street		Cambridge	Cambridge MA	3
31 Chilton St		Cambridge	3	3
122 Hancock St		Cambridge		MA
143 Avenue B, # 7G		New York		New York NY
184 Huron Avenue		Cambridge		
24 Coolidge Road		Arlington		MA
43 Gold Star Rd.		Cambridge		MA
50 Kirkland St.		Cambridge	Cambridge MA	3
83 Thorndike St		Cambridge	3	3
		Cambridge	3	MA
119 Fayerweather St.	38	. Cambridge	Cambridge	Cambridge M
		Ridgefield		
5 Clement Circle		Cambridge	3	3
13 Regent St.		Cambridge		3
TEC I ICACALIS CO. II T	# TOT		of Dimigran	A mingrain

	11/15/05 Vistaprint	10/31/05 Vistaprint	10/25/05 Village Catering	11/18/05 Verizon Wireless	12/15/05 Verizon	10/30/05 USPS	10/29/05 USPS	11/3/05 USPS	11/1/05 Staples	11/3/05 Staples	10/27/05 Staples	11/9/05 Staples	11/7/05 Staples	11/2/05 Simard Printing	10/30/05 Safety NetAccess Inc.	11/25/05 Jose Mexican Rest	11/5/05 Home Depot	11/4/05 Fresh Pond Market	11/15/05 Flora	10/30/05 Ed Marin	10/28/05 Dunkin'Donuts	11/3/05 CTE Jesse Gordon	10/25/05 Amtrak	Date To whom paid
	100 Hayden Ave Lexington MA	100 Hayden Ave Lexington MA	MacDougall St NY, NY	Tucson AZ	Worcester MA	Harvard Square Cambridge MA	Harvard Square Cambridge MA	Harvard Square Cambridge MA	Fresh Pond Parkway Cambridge MA	300 Salem St. Woburn MA	83 East Water St. Rockland MA	131 Sherman St, Cambridge	Watertown MA	Huron Ave. Cambridge MA	Mass. Ave. Arlington MA	78 Chestnut Hill Ave. Boston MA	Fresh Pond Parkway Cambridge MA	1770 Mass Ave #630 Cambridge MA	South Station Boston MA	Address				
Expenditures over \$50 Expenditures under \$50 Total Expenditures	printing	printing	food for event	allocated cell phone use	phone service	postage	postage	postage	photocopying	photocopying	printer supplies	photocopying	photocopying	printing	website design	campaign event	material for signs	food for 2 events	volunteer help thank you	consulting	coffee& food for event	contribution	travel to campaign event	Purpose of expenditure
\$5,151.24 \$16.21 \$5,167.45	\$201.08	\$174.33	\$179.43	\$99.26	\$168.57	\$74.00	\$74.00	\$185.00	\$191.09	\$97.34	\$143.82	\$41.97	\$58.50	\$1,636.09	\$250.00	\$377.71	\$98.00	\$89.87	\$150.00	\$500.00	\$63.18	\$100.00	\$198.00	Amount



## Schedule E Municipal Form Disclosure of Assets Statement

Office of Campaign and Political Finance

Commonwealth of Massachusetts				
File with: City or Town Clerk or Election Commiss	ion		CDF ID	A Linearity Tollings
VALSE BY LAW SAME SERVEN			CPF ID#	
This form should be filed by	all candidates	and committees with each	year end and each diss	olution report.
Committee Name: Committee	to Elec	t Patty Nolas	1 Date of re	port. Jan. 20,20
A W		Company of the second second	- Wil	
	ididates and co	ommittees must fill in Pa	irt A <u>or</u> Part B.	
Part A:				
No assets* were acquired or dispo	osed of by this	candidate/committee dur	ing the period covered	by this statement
Part B:				
Assets acquired: List all assets acqu	uired since the	committee last filed this	statement. If this is th	ne first Schedule E von
have filed, list all assets.		vonantiov nate thear this	outernoise. It time to the	ic mise benedic L you
Asset	Date	Present Location	Manner Acquired	Cost/Value
Include year, model or other identifying	Acquired			
information, if applicable.				
Assets disposed of List all assets as	ld traded or two		atorio di constituti di Co	to the common of the
Assets disposed of: List all assets so  Asset			T	Estate Transport
Include year, model or other identifying	Date	Disposition to: Name and Address	Date and Manner	Disposition Value Attach statement of how
information, if applicable.	Acquired	Name and Address	of Disposition	value is determined.
Assets acquired by a political committee mu	ist be used for the	political purpose for which th	e committee is organized ar	nd must remain the property
of that committee. Assets may be disposed				EE 1900
*An asset is defined as any one item that ha a cost/value of \$1,000 or more at the time of	is a useful life of t acquisition.	nore than one year, would be	depreciable in a normal bus	siness environment, and has
Signed under the penalties of perjury:		Sig	ned under the penalties of p	erjury:
				- V

Attach additional sheets, if necessary, to disclose all assets acquired or disposed of in a reporting period.

Candidate signature

### SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
	A /	DNE	7	
			In-kind over \$50	4
		Line 16:	In-kind \$50 and under	
	Enter on page 1, line 6	Line 17:	Total In-kind	

<sup>\*</sup> If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

## SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
1/20/05	Patricia Nolon-Self	184 Huron Ave. Camb. MA 02138	to fund campaign organses	F1000,00
11/3/05	1.0	t1	11	\$1000.00
			from Filester	
	Enter on page 1, line 7	Line 18: OUTSTANDING	LIABILITIES (ALL)	\$ 2000,00

This page may be copied if additional pages are required to report all activity. Please include your committee name and a page number on each page.

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